What is claimed is:

1.   A polynucleotide comprising at least 10 contiguous nucleotides of a nucleotide sequence selected from the group consisting of nucleotide sequences of SEQ ID NOS: 1-12 and comprising a nucleotide at position 101 of the nucleotide sequence, or a complementary polynucleotide thereof.

2.   A polynucleotide which is hybridized with the polynucleotide of claim 1 or the complementary polynucleotide thereof.

3.   The polynucleotide of claim 1 or 2, which is 10 to 100 nucleotides in length, or the complementary polynucleotide thereof.

4.   The polynucleotide of claim 1, which is a primer or a probe.

5.   A microarray for diagnosis of colorectal cancer, which comprises the polynucleotide of claim 1 or the complementary polynucleotide thereof.

6.   A kit for diagnosis of colorectal cancer, which comprises the polynucleotide of claim 1 or the complementary polynucleotide thereof.

7.   A method of diagnosing colorectal cancer in an individual, which comprises:

isolating a nucleic acid sample from the individual; and

determining a nucleotide of at least one polymorphic site (position 101) within polynucleotides of SEQ ID NOS: 1-12 or complementary polynucleotides thereof.

8.   The method of claim 7, wherein the operation of determining the nucleotide of the at least one polymorphic site comprises:

hybridizing the nucleic acid sample onto a microarray on which the polynucleotide of claim 1 or its complementary polynucleotide is immobilized; and

detecting a hybridization result.

9.   The method of claim 7, wherein when at least one selected from the group consisting of A, A, C, G, G, T, G, C, G, G, A, and A which are respective risk

16

alleles of the polynucleotides of SEQ ID NOS: 1-12 is detected, it is determined that the individual has a higher likelihood of being diagnosed as at risk of developing colorectal cancer.